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Bib Data Sheet

CONFIRMATION NO. 7683

<b>SERIAL NUMBER</b> 10/712,124	<b>FILING OR 371(c) DATE</b> 11/13/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1636	<b>ATTORNEY DOCKET NO.</b> P2000R1	
<b>APPLICANTS</b> Victoria Smith, Burlingame, CA; <i>OK/CQ</i>					
<b>** CONTINUING DATA *****</b> <i>OK/CQ</i> This appln claims benefit of 60/425,813 11/13/2002					
<b>** FOREIGN APPLICATIONS *****</b> <i>N/A</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 03/05/2004					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 115	<b>TOTAL CLAIMS</b> 45	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>CQ</i>					
Verified and Acknowledged Examiner's Signature _____ Initials _____					
<b>ADDRESS</b> 09157					
<b>TITLE</b> Methods and compositions for detecting dysplasia					
<b>FILING FEE RECEIVED</b> 1522	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		